EXHIBIT A

Settlement Agreement

Remijas, et al. v. Neiman Marcus Group, LLC, Case No. 1:14-cv-01735 (N.D. III.) The Honorable Samuel Der-Yeghiayan

Your claim must be submitted or postmarked by: Month Day, 2017

Remijas et al. v. The Neiman Marcus Group, LLC, Case No. 1:14-CV-01735 (N.D. Ill.).

NMS

CLAIM FORM

Full Name:	Claim Number:		
(First)	(Last)		
Mailing Address:			
City:	State:	Zip:	
Telephone Number: ()	E-mail:		
provide an email address. The information	n you provide will not be used for ot ll not be sold, nor will it be provided	ur claim, which we will do primarily by email if you her purposes, including but not limited to marketing to others, except insofar as is necessary to efficiently	
QUESTION ONE	CERTIFIC VILLEDITION QUES	110115	
· · · · · · · · · · · · · · · · · · ·		Goodman, Cusp, or Last Call store, not including e or web site, between July 16, 2013 and October	
☐ <u>Yes</u> (Proceed to Question ?	Two)		
\square No (You are not eligible to	submit a claim)		
OUESTION TWO			

IMPORTANT NOTE: To receive a payment, you must submit information sufficient to establish that your credit or debit card was used at a Neiman Marcus, Bergdorf Goodman, Cusp, or Last Call store while malicious software capable of capturing payment card information was active in that store. The only way to be certain that you have

Provide all of the information requested by one of the following two options. You may submit all of the information

submitted information sufficient to determine whether or not you are entitled to a payment is to submit the

information requested in Question 2, Option A.

requested by both of the following two options if you wish.

If you choose instead to submit the information requested in Question 2, Option B (but not Question 2, Option A), your claim may be denied even if your credit or debit card was used at a Neiman Marcus, Bergdorf Goodman, Cusp, or Last Call store while malicious software capable of capturing payment card information was active in that store because there may not be records sufficient to establish that it was used at that time and place.

Please continue on reverse side

	Option A		
Provide the last four digits of the credit or Bergdorf Goodman, Cusp, or Last Call sto online store or web site, between July 16,	ore, not including any restaurant in an		
AND			
Provide the date(s) and location(s) of all p Call store, not including any restaurant in July 16, 2013 and October 30, 2013 using	any such store and not including any		
Date of Purchase	Location of Purchas	e	
If the credit or debit card was used to ma Cusp, or Last Call store, not including an site, between July 16, 2013 and October 30	y restaurant in any such store and not	including any online store or web	
	Option B		
Provide the full name of the cardholder of Cusp, or Last Call store, not including an site, between July 16, 2013 and October 3 such purchase(s) (<i>check box or provide call</i>)	y restaurant in any such store and not 0, 2013, as the name appeared on the o	including any online store or web	
☐ Same as Above, or			
Full Name of Cardholder:			
AND			
Provide the billing address for the credit of Call store, not including any restaurant in July 16, 2013 and October 30, 2013, as of	any such store and not including any	-	
☐ Same as Above, or			
Mailing Address:			
City:	State:	ZIP:	
ATTESTATION AND SIGNATURE			

I certify under penalty of perjury that the information I am providing in this claim form is true and correct, and that I am the cardholder of the card identified in my response to Question Two, above.

Name: ______Signature: _____ Date: _____

If you have questions, please contact the Settlement Administrator at 1-8xx-xxx or visit www.NMSettlement.com.